

an affordable, voluntary prescription drug benefit for all of our seniors during the 106th Congress.

#### THE MESSAGE MATTERS: WORDS THAT WORK

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Florida (Mr. FOLEY) is recognized for 5 minutes.

Mr. FOLEY. Mr. Speaker, as we enter the final stretch of legislative business for this Congress and as we prepare to engage in the campaigns back home, as a member of Florida and a member of the Committee on Ways and Means of Congress, I wanted to assure residents in Florida that, in fact, Republicans have initiated prescription drug coverage for seniors in our community.

Back in 1994, then Governor Lawton Chiles was running for reelection to the governorship and was being challenged by Jeb Bush. Governor Chiles ran negative ads saying, if Jeb Bush was elected the governor, he would take away Social Security.

Now, everyone knows the governor of a State does not control Social Security. But the scam worked and, in fact, Jeb lost. The governor went on later to apologize after a thorough investigation found that the campaign did, in fact, make those spurious claims that were false and misleading.

Now we are being told that if we do not elect a majority to the other side of the aisle that we will not see prescription drug coverage for senior citizens.

Let us put people before politics; and let us make certain that, at the end of the day, we come together in a bipartisan fashion to bring about prescription coverage for our seniors.

In town hall meetings in Florida, I meet with seniors all the time of every political stripe, not just Republicans, but Democrats and Independents. Their first thought to me is, we do not want something free, but we certainly do not want to be forced into a government-run HMO-style system that makes everyone in the same system one size fits all. They would like access to prescription drugs. Yes, they would like lower pricing of prescription drugs.

In this House, we are trying to do that. We recognize the cost is becoming a big burden on many seniors in our community. But we want to make certain that we only cover the poorest and the sickest.

When the President's drug plan first came to our Committee on Ways and Means, there was no provision for catastrophic coverage. We are most concerned in our bill of finding a way for the sickest Americans who may have diabetes, who may have hypertension, who may have suffered from cancer, who may have to depend daily on a multiple dose of medications that they, in fact, have some safeguard against financial ruin.

Our bill does that. But our bill also provides a voluntary system in which they can decide whether they want to enroll in a new drug plan.

Senator EDWARD KENNEDY of Massachusetts stated that two-thirds of Americans currently have prescription drug coverage who are 65 and older. So it begs the question, why are we going to upturn, if you will, or turn over the entire prescription drug benefit to those two-thirds when it is really the one-third we should be seeking to remedy.

Those may again be the poorest. And we can help through our plan to provide for prescription drug coverage both through the States and the Medicaid system and through our innovative care.

Again, people before politics.

We want to put families back in charge of the decisions they make relative to their prescription coverage and their health care and what policies they may or may not want to join, not a forced plan by the Federal Government.

But we also have to recognize some of the other things that we have to consider, long-term care insurance, another serious issue facing Americans. We should not just be talking, Mr. Speaker, about prescription drugs. We have to face reality that our community and our country is growing older and that the need for long-term health care insurance or coverage will become even more profound in the years ahead.

Now, fortunately this Congress is on its way to paying down with surplus dollars, 90 percent of that surplus, to pay down the Federal debt. When we first came to Congress, many of us prescribed a bill that would in fact use any anticipated surplus for paying down debt, strengthening Social Security and Medicare, and providing some tax relief for our citizens.

I think we are on the threshold of greatness in being able to announce to the people that, yes, both sides of the aisle can take credit, because \$356-some billion of the debt has been retired in the last 3 years of this Congress's existence.

Now, that is a monumental achievement in as much as now the interest that was going to be paid on that \$356 billion can now be used to fund and strengthen Social Security, fund and strengthen Medicare and, yes, provide prescription drugs.

So before people who are listening to our voices get scared by TV ads suggesting that some party is going to do more for them than the other, at least listen to the facts at hand and recognize that I believe so many people in Congress on both sides of the aisle are in fact striving to provide the coverage to make certain our seniors have the drugs they need that they may not be able to afford; but thankfully for the pharmaceutical industry, which has

brought some miraculous drugs to the forefront, we will provide a way to provide them cheaper, more affordably and more accessibly.

#### UNIFIED BUDGET

The SPEAKER pro tempore. Under a previous order of the House, the gentleman from Maryland (Mr. BARTLETT) is recognized for 5 minutes.

Mr. BARTLETT of Maryland. Mr. Speaker, I just wanted to spend a few minutes talking about some terminology associated with the debt. There are a lot of terms that are used.

I hear terms like the "public debt," the "trust fund debt," the "national debt." The other day I heard someone say "Federal debt."

What are all these debts, and how do they relate to each other?

Before we can talk about debt, though, we have to talk a little bit about the balanced budget and what the balanced budget means.

The budget that we had hoped to balance and have balanced, as a matter of fact, is the unified budget. The unified budget is all the money that comes into Washington and all the money that leaves Washington, and that budget is balanced.

But about 10 percent of the money that comes into Washington should not be Washington's money to spend because a big percent of that is monies that come from the American people taken from them presumably to be put in trust for them.

The two biggest trust funds are the Social Security trust fund and the Medicare trust fund.

But in the unified budget, which looks at all the money that comes into Washington and all the money that leaves Washington, we take that trust fund money, we took it all up in the lockbox for Social Security and now the lockbox for Medicare, we took all that money and spent it.

And what is in the trust fund is not money. There are IOUs in there. And it is a very special IOU. It is an IOU; it is a non-negotiable U.S. security.

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Although the Social Security trust fund should have about \$900 billion in it and the total trust fund should have roughly double that in it, there is in fact no money in the trust funds. All that is in the trust funds is IOUs.

In the past years when we were running a \$300 billion deficit, the real deficit in terms of accounting for the trust funds which we took and spent, the real deficit would have been about \$160 billion more than that.

What we have done is just phenomenal. At the beginning of this administration, the President never thought that we could balance the budget, and he was showing \$300 billion deficits which were really \$460 billion